



2025-2026
Drive Safe Hampton Roads
Get It Together Seatbelt Challenge
Photo/Video Release Form
(Print Information Clearly)

School Name: _____

Date: _____

I hereby give Drive Safe Hampton Roads, its legal representatives and assigns, the right and permission to publish photographs/video of my child.

(Clearly Print Name of Student)

These pictures may be used in publications, online at www.drivesafehr.org, audio-visual presentations, promotional literature, advertising, or in any other manner.

I hereby warrant that I am the legal parent/guardian of the above child.

The participating student is over 18: Yes _____ No _____

Signature _____
(Signature of Legal-Aged Student OR Parent/Guardian if the student is under age 18)

Printed Parent's Name _____
(Clearly Print Name of Parent/Guardian if student is under age 18)

Contact Phone Number _____

Address _____

City _____ State _____ Zip _____

Witnessed by _____
(Signature of adult witness)

This document is intended solely for the use of Drive Safe Hampton Roads and should be treated as confidential communication. Please contact Drive Safe Hampton Roads at Admin-OP@drivesafehr.org for any questions.
Scan and send to GIT@drivesafehr.org